

PATENT

ATTORNEY DOCKET N°: 03-0771
EXPRESS MAIL LABEL N°: EV 303 409 340 US

ORIGINAL PATENT APPLICATION TRANSMITTAL LETTER

MAIL STOP PATENT APPLICATION
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450



Transmitted herewith for filing is the patent application of:

INVENTORS:

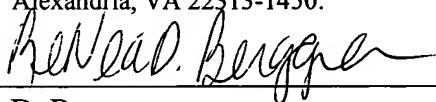
C. Roger Hickerson
1668 Rutgers
Wichita, KS 67212
Citizen of United States

Louis H. Odenwald, Jr.
8830 Shadowridge
Wichita, KS 67226
Citizen of United States

Title: **Methodology for Remote HBA Management Using Message Encapsulation**

CERTIFICATION UNDER 37 C.F.R. §1.10

I hereby certify that this Original Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date, December 5, 2003 in an envelope as "Express Mail Post Office to Addressee", Mailing Label N° EV 303 409 340 US, with sufficient postage, addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



ReNea D. Berggren

DATED: December 5, 2003

1. Type of Application

This is an Original Application.

2. Benefit of Prior U.S. Application(s) (35 U.S.C. §)

USSN

Filing Date

Inventor(s)

Status

3. Papers Enclosed That Are Required for Filing Date under 37 C.F.R. §1.53(b) (Regular) or 37 C.F.R. §1.153 (Design) Application

Eight (8) Pages of Specification;
Five (5) Pages of Claims;
One (1) Page of Abstract; and
Seven (7) Sheets of Drawing Figures.

4. Additional Papers Enclosed

Information Disclosure Statement is enclosed.

5. Declaration or Oath

The signed Declaration and Power of Attorney is attached

6. Inventorship Statement

The inventorship for all the claims in this application are the same.

7. Language

English.

8. Assignment

The signed Assignment is attached. The Recordation Form Cover Sheet is enclosed.

9. Certified Copy

None are required.

10. Fee Calculation (37 C.F.R. §1.16)

BASIC FEE							\$770.00
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EXCESS CLAIM FEE							
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TOTAL OVER TWENTY	21	-20	=	1	X \$18.00	\$18.00
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INDEPENDENT OVER THREE	3	-3	=	0	\$86.00	\$0.00
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MULTIPLE DEPENDENT				0	\$290.00	\$0.00
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ASSIGNMENT RECORDATION FEE					\$ 40.00	\$40.00
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TOTAL FILING FEES						<u><u>\$828.00</u></u>
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11. Small Entity Statement(s)

None required.

12. Request for International - Type Search (37 C.F.R. §1.104(d))

None required.

13. Authorization to Charge Fees

The Commissioner is hereby authorized to charge the filing fees of **\$828.00** to Deposit Account N^o 12-2252. Please charge any underpayments related to this filing or credit any excess to Deposit Account N^o 12-2252. A copy of this *Transmittal* is enclosed for accounting purposes only.

Please direct all correspondence and telephone calls to:

CUSTOMER NO. 24319
PETER SCOTT
LEGAL DEPARTMENT - IP
LSI LOGIC CORPORATION
M/S D-106
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MILPITAS, CA 95035

DATED: December 5, 2003.

Respectfully submitted,
C. Roger Hickerson et al.,
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By Walter J. Malinowski
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This Transmittal Ends With This Page.